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## Special issue on cross cultural perspectives in dementia research

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Dementia is, truly, a global challenge. It is well documented how increases worldwide in life expectancy have been leading to growing numbers of people with chronic conditions associated with aging, including dementia. The economic and social impact of dementia, linked to its contribution to disability and dependence, highlights it as one of the public health priorities of the 21<sup>st</sup> century. However, how far have we come in turning dementia into a global topic of research, and, more than that, using a global approach to study dementia?

It has been shown that although most people with dementia live in developing countries, only a fraction of population-based studies is conducted in these world regions. Additionally, cross-cultural comparisons, which can shed light on important similarities and specificities, disentangling biological and contextual factors, are limited in number, considering the challenges to conduct this type of study. The articles in this special issue try to bridge this gap, covering the study of tools for transcultural diagnosis, adaptation or validation of interventions and instruments, and comparisons of findings obtained in developing and developed countries.

A major finding of transcultural studies is that the same theoretical and practical expectations may not be met, and this requires careful study. The review by Calvo et al. shows that cross-cultural variability can be driven fundamentally by linguistic differences. They make the point that most research has used participants from a heavily restricted range of language groups, whereas there are about 7,000 languages spoken currently. This is shown to affect the conclusions from cognitive reserve studies, in which bilingualism have been considered too narrowly. For example, taking into account the level of similarity between cognitive structures and the relative demands on

working memory between dyadic languages may explain why cognitive reserve resulting from bilingualism does not seem to be a stable phenomenon.

At a psychosocial and treatment level related to dementia, linguistic factors may play a part, but also societal experiences are equally important. This is illustrated by the study by Dourado et al. that compared the experiences of people with young onset dementia and their carers, either Norwegian or Brazilian. Whilst there were many common experiences, it was found that subtle differences in levels of adjustment were present related to the family expectations. Specifically, the Norwegian group appeared to have greater adjustment associated with access to and confidence in tailored formal support. The Brazilian group, which it was thought to have a greater emphasis on the family as social support, showed more frustration concerning the caregiving process.

Similarly, different world views and their associated cognitive styles impact on how therapeutic approaches might be administered. In the study by Wong et al., Cognitive Stimulation Therapy (CST) was administered to Chinese speaking people with dementia in Hong Kong. Clear cultural themes were identified that had a large impact on the process of providing CST. This included the cultural inclination for the participants to be cautious about revealing personal information, which tended to discourage discussions related to thoughts and feelings. Conversely, the participants seemed to respond better to pragmatic approaches, in which activity and focus on such aspects as social food provision tended to produce greater engagement, reflecting Chinese pragmatism. With a culturally tailored approach, the study reproduced the same level of benefit as found in original UK studies.

Other studies in the special edition show that specific measurement techniques can be adapted and validated cross-linguistically and cross-culturally with consistent results. For example, the study by Dela Salla and colleagues showed that their temporal binding task, which shows good sensitivity and specificity for dementia diagnosis, could be converted into a 'paper and pencil format' and be shown to work as well with a Romanian sample, their original studies conducted on Scottish people with dementia. Boycheva et al. found that the Mattis Dementia Rating Scale, when translated into Spanish, was shown to be a reliable and valid detector of cognitive impairment in patients with mild cognitive impairment and Alzheimer's disease. Finally, Mograbi et al. used a Brazilian sample to distinguish between the manner of which activities of daily living are affected by depression or dementia. Whereas dementia results in all aspects of

daily living activities being reduced, depression tends to impact on advanced activities of daily living, such as travelling or attending clubs.

Whilst we have still to recognize we are at the beginning, the diverse approaches and cultures studied in this special edition of the International Journal of Geriatric Psychiatry reflect current developments of a global approach to study of dementia.